PTO/SB/30 (07-06)

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## Request For Continued Examination (RCE) Transmittal

Address to: MS RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

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Application Number	10/049,315-Conf. #3720			
Filing Date	February 8, 2002			
First Named Inventor	Yuji Sawada			
Art Unit	2178			
Examiner Name	K. R. Stork			
Attorney Docket Number	56924(70551)			

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

<ol> <li>Submission required under 37 CFR 1.114 Note: If the RCE is proper, an amendments enclosed with the RCE will be entered in the order in which they we applicant does not wish to have any previously filed unentered amendment(s) entamendment(s).</li> </ol>	re filed unless app	licant instructs otherwise. If			
a. Previously submitted. If a final Office action is outstanding, any may be considered as a submission even if this box is not check		ed after the final Office action			
i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on					
ii. Other					
b. x Enclosed	•				
i. X Amendment/Reply iii. Information I	Disclosure State	ment (IDS)			
ii. Affidavit(s)/Declaration(s) iv. Other					
2. Miscellaneous					
a. Suspension of action on the above-identified application is requ	ested under 37 (	CFR 1.103(c) for a			
period of months. (Period of suspension shall not exc	eed 3 months; Fee	under 37 CFR 1.17(i) required)			
b. Other					
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 w	hen the RCE is fi	led.			
a. X The Director is hereby authorized to charge the following fees, a	anv undernavme	nt of fees, or credit any			
overpayments to Deposit Account No. 04-1105 . I ha					
i. X RCE fee required under 37 CFR 1.17(e)					
ii. Extension of time fee (37 CFR 1.136 and 1.17)					
T '					
iii.					
b. Check in the amount of \$ enclosed					
c. Payment by credit card (Form PTO-2038 enclosed)					
SIGNAȚURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
Signature ###	Date Septe	mber 8, 2006			
Name (Print/Type) Steven M. Uersen	Registration No.	42,693			

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oursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			8). Applie	Complete if Kn			· ·	
FEE TRANSMITTAL			Application Number Filing Date		10/049,315-Conf. #3720 February 8, 2002			
For FY 2006		<del> </del>			Y. Sawada			
FOF F 1 2000			-	iner Name	-	K. Stork		
	0.50							
Applicant claim	_	Aconic						
TOTAL AMOUNT O	F PAYMENT (	3) 790.00	Attorn	ey Docket	No.	56924 (70551	·)	
METHOD OF PAY	MENT (check all the	at apply)						
Check C	redit Card Mo	oney Order	None	Other (	please iden	tify):		
X Deposit Account	Deposit Account Number	04-1105 Depos	it Account Nam	ne:	Edward <u>s</u> .	Angell Palmei	r & Dodge Ll	LP
For the above	e-identified deposit ac	count, the Direct	or is hereby	y authorize	ed to: (che	ck all that apply	)	
x Charge	fee(s) indicated belo	w		Charg	e fee(s) ind	dicated below, e	except for the	filing fee
	any additional fee(s) under 37 CFR 1.16 au		t of	x Credit	any overp	ayments		
FEE CALCULATION			pon filing	or may	be subje	ect to a surch	arge.)	
1. BASIC FILING, SE						-		
	FILING		SEARCH		EXAMIN	NATION FEES	3	
Application Type	<u>S</u> Fee (\$)	mall Entity Fee (\$) Fe		all Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	aid (\$)
Utility	300		00	250	200	100	100010	(47
Design	200		00	50	130	65		
Plant	200		00	150	160	80		
Reissue	300		00	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM F		100	· ·	Ū	v	v	s	mall Entity
Fee Description	LLO						Fee (\$)	Fee (\$)
Each claim over 20 (	including Reissues)						50	25
Each independent cla	- ·	Reissues)					200	100
Multiple dependent c							360	180
Total Claims	Extra Claims Fe	e (\$) F	ee Paid (\$)	<u>.                                    </u>	<u>M</u>	ultiple Depend	ent Claims	
22 -22 =	0 x				Fe	ee (\$)	Fee Paid (\$)	
HP = highest numer of to	tat claims paid for, if great	er than 20.						_
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5 -5 =	0 ×	=		<del></del>				
<u>-</u>	dependent claims paid for	, ir greater than 3.				<del></del> -		-
3. APPLICATION SIZ	E FEE and drawings exceed	100 sheets of par	per (exclud	ling electr	onically fil	led sequence or	computer	
listings under 37	CFR 1.52(e)), the ap	plication size fee	due is \$25	50 (\$125 f	or small e	ntity) for each a	additional 50	
sheets or fraction	thereof. See 35 U.S							_
<u>Total Sheets</u>	Extra Sheets	Number of ea					Fee Pa	<u>aid (\$)</u>
1	0 = /9	50	(round	up to a who	ole number)	×	=	-id (6)
4. OTHER FEE(S)  Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): 1801 Request for Continued Examination 790.00								
	ing surcharge). 100	i Nequestiol (	Jonanaea					
SUBMITTED BY	<del></del>		Registra		42,693	Telephone	(617) 439-	-4444
Signature	/ har far		(Attorne)	//Agent)	72,030		September:	

SUBMITTED BY							
Signature	T		·	Registration No. (Attorney/Agent)	42,693	Telephone	(617) 439-4444
Name (Print/Type)	Steven	M. Jeris	en			Date	September 8, 2006